

The 2015 impact factor for *Pol Arch Med Wewn*: comments from the Editor-in-Chief

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We are pleased to announce that the 2015 impact factor (IF) for the *Pol Arch Med Wewn* is 2.054. We maintain a solid position as the most prestigious Polish journal that publishes papers in internal medicine and related disciplines, such as cardiology, gastroenterology, allergology, and others (TABLE 1).

Our 2015 IF is slightly lower than that published for 2014 (FIGURE 1). Kiesslich et al¹ have reported recently that among all journals listed in the Journal Citation Report (JCR) (n = 11 858), 55.1% featured an increase in IF between the years 2013 and 2014, while the IF of 44.6% of the journals decreased and as few as 0.25% had their IF unaltered. Thus, the *Pol Arch Med Wewn* is not the only journal that has a lower current IF. As always, the reasons behind this change are complex. So, what decides on the IF?

A journal's IF, a basic measure of the quality of journals, published each year by Thomson Reuters, is calculated by dividing all citations to this journal within the particular year by the number of citable articles encompassing "substantive articles and reviews" published in this journal during the previous 2 years. It should also be pointed out that the exact IF published by Thomson Reuters cannot be easily calculated using publicly available data, and the final value always differs slightly from the estimates.

A large number of known factors lead to an increase in IF. They include the selection of topics covered by a given journal, article types, language of publication, not to mention the various types of citation misconduct and inflation of IF.²

The "top-ten JIF manipulation" aims to boost citations, either by means of direct editorial influence on reference lists or by applying tactical measures, for example, the focus on trendy or "sexy" topics, all leading to an increase in the numerator of the IF equation.³ Another approach is to minimize noncitable articles in order to reduce the denominator.³ In contrast to the number of citations, the number of articles, which

is the IF equation's denominator, is primarily subject to the journal's editorial decisions. A frequently used tactic is to increase the number of references, which the IF depends on.

When making attempts to boost the journal's IF, it should be highlighted that significant alterations of citation numbers led to temporary exclusions of journals from the JCR. Almost all of the banned journals, which make up less than 0.5% of the total number, are excluded because of the excessive rate of self-citations, all more than 50% to 60%. In 2012, a Polish journal, *Medical Science Monitor*, and 2 other journals, *Cell Transplantation* and *The Scientific World Journal*, were removed from the JCR since they apparently worked together to cite each other and thus raise their IFs. There are no examples of journals that were removed from the JCR due to significant increases in IF based on reducing the number of the articles published.

Of key importance for a journal's IF is Thomson Reuters' decision as to which article should be categorized as a citable item and which not. It may markedly increase or decrease the denominator and consequently affect the IF.^{4,5} An increase in the "citable" items entering the denominator can result in a rapid fall of the IF, for example, in 1997, the IF of *The Lancet* decreased from about 17 to 12, following the inclusion of (citable) research letters to the denominator.⁶ Opthof et al⁷ have reported that solely accepting the high-quality manuscripts with a "100% priority score" assigned by the reviewers could increase the IF by about 40%, with the simultaneous reduction of the journal's content below 30%.

Our policy regarding the IF equation's denominator is to keep the balance between these strategies aiming at a higher IF in order to ensure a wider platform for publishing clinical and basic studies in internal medicine, predominantly conducted in Poland. A rising number of valuable submissions despite a relatively low acceptance rate of about 25% prompts this decision,

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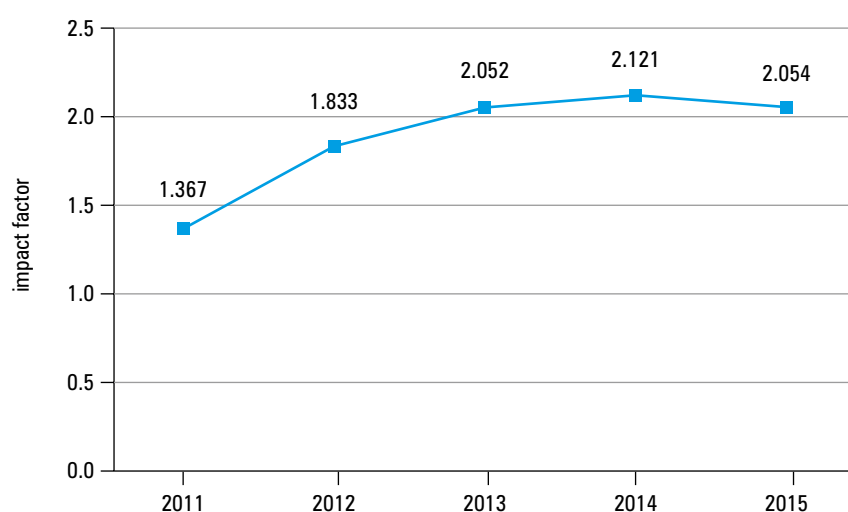
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TABLE 1 Changes in the impact factors (IFs) of Polish biomedical journals published in 2014 and 2015; an arrow up indicates an increase in IF and an arrow down—a decrease

Abbreviated journal title	IF 2015	IF 2014
J Physiol Pharmacol	↑ 2.804	2.386
Arch Immunol Ther Ex	↓ 2.464	3.176
Pharmacol Rep	↑ 2.251	1.928
Pol Arch Med Wewn	↓ 2.054	2.121
J App Genet	↑ 1.929	1.477
Arch Med Sci	↓ 1.812	2.030
Hered Cancer Clin Pr	↑ 1.550	1.472
J Contemp Brachyther	↑ 1.413	1.284
Postep Derm Alergol	↑ 1.342	0.845
Pol J Pathol	↑ 1.240	1.128
Folia Neuropathol	↓ 1.233	1.568
Adv Med Sci-Poland	↑ 1.211	1.105
Cardiol J	↑ 1.130	1.062
Adv Clin Exp Med	↑ 1.127	1.095
Endokrynol Pol	↑ 1.112	0.933
Ann Transpl	↓ 1.032	1.261
Transl Neurosci	↓ 1.012	1.319
Videosurgery Miniinv	0.920	—
Ann Agric Environ Med	↓ 0.895	1.126
Psychiatr Pol	↑ 0.884	0.733
Kardiol Pol	↑ 0.878	0.539
Postep Hig Med Dosw	↑ 0.769	0.573
Neurol Neurochir Pol	↑ 0.747	0.641
Ginekol Pol	↑ 0.609	0.601
Folia Morphologica	↑ 0.469	0.336
Postep Kardiol Inter	↑ 0.358	0.148
Cent Eur J Med	↑ 0.309	0.153

FIGURE 1 Impact factor of *Pol Arch Med Wewn* in the years 2011–2015



with an additional issue scheduled for 2017, which makes a total of 11 issues annually. The *Pol Arch Med Wewn* aims to provide scientists and physicians of all levels of experience, coming from both the academic and nonacademic settings, with a forum to exchange views and novel findings in internal medicine. This journal gives all readers the opportunity to present their own data and

interact directly on specific topics with authors using the Letter to the Editor section.

In September 2014, the *Pol Arch Med Wewn* transitioned to the pay-to-publish journal model, not without my doubts and some concerns. This was a major change that resulted in a transient decline in the number of submissions. It remains to be observed within a few months whether this

TABLE 2 The most cited original articles published in *Pol Arch Med Wewn* in 2013 and 2014 that most contributed to its 2015 impact factor (based on the Web of Science, July 2016)

No.	Article	Citation number (total)	Citation number in 2015
1	Endothelial function assessment in atherosclerosis: comparison of brachial artery flow-mediated vasodilation and peripheral arterial tonometry. Wilk G, Osmenda G, Matusik P, et al. <i>Pol Arch Med Wewn</i> . 2013; 123: 443-452.	19	10
2	Osteoprotegerin as a marker of cardiovascular risk in patients on peritoneal dialysis. Janda K, Krzanowski M, Chowaniec E, et al. <i>Pol Arch Med Wewn</i> . 2013; 123: 149-155.	15	3
3	Bioresorbable vascular scaffolds in patients with acute coronary syndromes: the POLAR ACS study. Dudek D, Rzeszutko L, Zasada W, et al. <i>Pol Arch Med Wewn</i> . 2014; 124: 669-677.	15	9
4	Advanced glycation end-products and arterial stiffness in patients with diabetic nephropathy and patients with chronic kidney disease without diabetes. Strozecki P, Kurowski R, Flisinski M, et al. <i>Pol Arch Med Wewn</i> . 2013; 123: 609-616.	11	4
5	Noninvasive ventilation for hypercapnic exacerbation of chronic obstructive pulmonary disease: factors related to noninvasive ventilation failure. Nicolini A, Ferrera L, Santo M, et al. <i>Pol Arch Med Wewn</i> . 2014; 124: 525-531.	10	6
6	Effect of postconditioning on infarction size, adverse left ventricular remodeling, and improvement in left ventricular systolic function in patients with first anterior ST-segment elevation myocardial infarction. Elzbieciak M, Wita K, Grabka M, et al. <i>Pol Arch Med Wewn</i> . 2013; 123: 268-276.	8	4
7	Reduced intake of dietary antioxidants can impair antioxidant status in type 2 diabetes patients. Zujko ME, Witkowska AM, Gorska M, et al. <i>Pol Arch Med Wewn</i> . 2014; 124: 599-607.	6	6
8	Correlation between the activity of the autonomic nervous system and endothelial function in patients with acute coronary syndrome. Cieslik-Guerra UI, Fila M, Kaminski M, et al. <i>Pol Arch Med Wewn</i> . 2014; 124: 509-515.	6	6

TABLE 3 The most cited reviews published in *Pol Arch Med Wewn* in 2013 and 2014 that most contributed to its 2015 impact factor (based on the Web of Science, July 2016)

No.	Article	Citation number (total)	Citation number in 2015
1	2012 revision of the Atlanta Classification of acute pancreatitis. Sarr M. <i>Pol Arch Med Wewn</i> . 2013; 123: 118-124.	20	7
2	Anticoagulation management in nonvalvular atrial fibrillation: current and future directions. Kornej J, Potpara T, Lip GYH. <i>Pol Arch Med Wewn</i> . 2013; 123: 623-634.	13	7
3	Practical aspects of new oral anticoagulant use in atrial fibrillation. Undas A, Pasierski T, Windyga J, et al. <i>Pol Arch Med Wewn</i> . 2014; 124: 124-135.	18	9
4	Obstructive sleep apnea, atrial fibrillation, and erectile dysfunction: are they only coexisting conditions or a new clinical syndrome? The concept of the OSAFED syndrome. Szymanski FM, Puchalski B, Filipiak KJ. <i>Pol Arch Med Wewn</i> . 2013; 123: 701-707.	12	6
5	New advances in stem cell research: practical implications for regenerative medicine. Ratajczak MZ, Jadczyk T, Pedziwiatr D, et al. <i>Pol Arch Med Wewn</i> . 2014; 124: 417-426.	11	7
6	Prevention of ischemic stroke in clinical practice: a role of internists and general practitioners. Niewada M, Czlonkowska A. <i>Pol Arch Med Wewn</i> . 2014; 124: 540-548.	9	5
7	Genetic risk factors of atherothrombosis. Montagnana M, Danese E, Lippi G. <i>Pol Arch Med Wewn</i> . 2015; 124: 474-482.	8	6

change will decrease the quality of the journal, leading to lower IF in the near future. Such phenomenon has been observed in several journals. Despite the fact that each accepted submission generates profit for the Publisher, the editorial board and myself intend to avoid the danger of lowering standards and accepting almost every article.

Traditionally, I would like to thank you all, our authors, reviewers, and editorial board members, for your invaluable contribution to the journal's success. In recognition of these efforts and to

officially thank all our contributors, we organized the 2nd Meeting of the *Polish Archives of Internal Medicine* at the ICE Congress Center in Kraków, Poland, on May 20, 2016. A photo story from the meeting is presented in Appendix 1 to the current issue. In addition, the major contributors to the 2015 IF among the authors who published their work in the *Pol Arch Med Wewn* have been listed in [TABLES 2](#) and [3](#).

We are proud of having an average turnaround time to the first editorial decision with review comments of 20 days and to the final decision

TABLE 4 Most active reviewers in 2015

No.	Reviewer name
1	Artur Dziewierz
2	Daniel P. Potaczek
3	Jolanta Małyszko
4	Tomasz Stompór
5	Jarosław Zalewski
6	Krzysztof Strojek
7	Małgorzata M. Bała
8	Michał Tendera
9	Grzegorz Opolski
10	Piotr Lipiec

of 36 days in 2015. It has been possible largely thanks to our reviewers. The names of those who were the most active in 2015 and always worked to deadlines are given in [TABLE 4](#). Appreciation and recognition should be expressed to all our reviewers for their valuable contribution. The names of all reviewers who submitted a review to our journal in 2015 are listed in Appendix 2 to the July–August issue.

It is truly exciting to recognize medical students who are already making notable contributions to clinical research and have found time to do science despite the rigorous demands of pursuing their medical education. The July–August issue of our journal features the best 3 students' papers.^{8–10} A photo story from the award winning ceremony is presented in Appendix 3 to the July–August issue. The story features also the winners of the best paper prize, awarded each year to the authors of the best original paper published in the *Pol Arch Med Wewn* in the previous year.

For all who have already submitted their work to the *Pol Arch Med Wewn*, keep up the good work in 2016! For new authors who are interested in publishing their work in our journal, we encourage you to publish with us. Our goal is to recover or even surpass the previous higher level of IF in 2017.

It is challenging to choose the right journal for a particular article. Among a number of different things to consider, including the prestige, impact factor, or the quality of reviews, some other aspects indicate that the *Pol Arch Med Wewn* could be a good choice, especially for Polish clinicians dealing with a broad spectrum of clinical issues from internal medicine.

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